

#  
Docket No.: 0630/1G704US2

**DECLARATION  
AND POWER OF ATTORNEY  
Original Application**

**COPY OF PAPERS  
ORIGINALLY FILED**

As a below named inventor, I declare that the information given herein is true, that I believe that I am the original, first and sole inventor if only one name is listed at 1 below, or a joint inventor if plural inventors are named below, of the invention entitled:

**Assay to Identify Estrogen Receptor Dependent Ligands That Regulate The Hepatic Lipase Promoter**

which is described and claimed in:

☐ the attached specification or ☒ the specification in application Serial No. 09/924,944 filed 8/8/01  
(for declaration not accompanying appl.)

that I do not know and do not believe that the same was ever known or used in the United States of America before my or our invention thereof or patented or described in any printed publication in any country before my or our invention thereof, or more than one year prior to this application, or in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to this application, that I acknowledge my duty to disclose information of which I am aware which is material to patentability in accordance with 37 CFR §1.56. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I hereby claim the priority benefits under 35 U.S.C. §119 of any application(s) for patent or inventor's certificate listed below. All foreign applications for patent or inventor's certificate on this invention filed by me or my legal representatives or assigns prior to the application(s) of which priority is claimed are also identified below.

**PRIOR APPLICATION(S), IF ANY, OF WHICH PRIORITY IS CLAIMED**

<u>COUNTRY</u>	<u>APPLICATION NO.</u>	<u>DATE OF FILING</u>
USA	60/255,837	12/15/00
USA	60/223,647	8/8/00

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all of AMERICAN HOME PRODUCTS CORPORATION, Five Giralda Farms, Madison,  
New Jersey 07940

and

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805 Third Avenue  
New York, NY 10022

DIRECT TELEPHONE CALLS TO:

Neepa Y. Choksi, Ph.D.  
  
212-527-7700

**FULL NAME AND RESIDENCE OF INVENTOR 1**

LAST NAME: Harnish	FIRST NAME: Douglas	MIDDLE NAME: C.
CITY: Warrington STATE OR FOREIGN COUNTRY: PA COUNTRY OF CITIZENSHIP: USA		

POST OFFICE ADDRESS: 389 Bradford Ave. CITY: Warrington STATE OR COUNTRY: PA ZIP CODE: 18976

FULL NAME AND RESIDENCE OF INVENTOR 2

LAST NAME: Scicchitano FIRST NAME: Marshall MIDDLE NAME: S.

CITY: Douglasville STATE OR FOREIGN COUNTRY: PA COUNTRY OF CITIZENSHIP: USA

POST OFFICE ADDRESS: 104 Meadowcrest La. CITY: Douglasville STATE OR COUNTRY: PA ZIP CODE: 19518

FULL NAME AND RESIDENCE OF INVENTOR 3

LAST NAME: Karathanasis FIRST NAME: Sotirios MIDDLE NAME: K.

CITY: Saline STATE OR FOREIGN COUNTRY: MI COUNTRY OF CITIZENSHIP: Greece

POST OFFICE ADDRESS: 4498 Saline-Waterworks Rd. CITY: Saline STATE OR COUNTRY: MI ZIP CODE: 48176

FULL NAME AND RESIDENCE OF INVENTOR 4

LAST NAME: Hsiao FIRST NAME: Chu-Lai MIDDLE NAME:

CITY: Waltham STATE OR FOREIGN COUNTRY: MA COUNTRY OF CITIZENSHIP: USA

POST OFFICE ADDRESS: 55 Sherbourne Place CITY: Waltham STATE OR COUNTRY: MA ZIP CODE: 02451-7303

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SIGNATURE OF INVENTOR 1: Douglas C. Harwell DATED: 2/12/02

SIGNATURE OF INVENTOR 2: \_\_\_\_\_ DATED: \_\_\_\_\_

SIGNATURE OF INVENTOR 3: \_\_\_\_\_ DATED: \_\_\_\_\_

SIGNATURE OF INVENTOR 4: \_\_\_\_\_ DATED: \_\_\_\_\_



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212-527-7700

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FULL NAME AND RESIDENCE OF INVENTOR 2

LAST NAME: Scicchitano FIRST NAME: Marshall MIDDLE NAME: S.

CITY: Douglasville STATE OR FOREIGN COUNTRY: PA COUNTRY OF CITIZENSHIP: USA

POST OFFICE ADDRESS: 104 Meadowcrest La. CITY: Douglasville STATE OR COUNTRY: PA ZIP CODE: 19518

FULL NAME AND RESIDENCE OF INVENTOR 3

LAST NAME: Karathanasis FIRST NAME: Sotirios MIDDLE NAME: K.

CITY: Saline STATE OR FOREIGN COUNTRY: MI COUNTRY OF CITIZENSHIP: Greece

POST OFFICE ADDRESS: 4498 Saline-Waterworks Rd. CITY: Saline STATE OR COUNTRY: MI ZIP CODE: 48176

FULL NAME AND RESIDENCE OF INVENTOR 4

LAST NAME: Hsiao FIRST NAME: Chu-Lai MIDDLE NAME:

CITY: Waltham STATE OR FOREIGN COUNTRY: MA COUNTRY OF CITIZENSHIP: USA

POST OFFICE ADDRESS: 55 Sherbourne Place CITY: Waltham STATE OR COUNTRY: MA ZIP CODE: 02451-7303

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SIGNATURE OF INVENTOR 1: \_\_\_\_\_ DATED: \_\_\_\_\_

SIGNATURE OF INVENTOR 2: Marshall S. Scicchitano DATED: 12/9/02

SIGNATURE OF INVENTOR 3: \_\_\_\_\_ DATED: \_\_\_\_\_

SIGNATURE OF INVENTOR 4: \_\_\_\_\_ DATED: \_\_\_\_\_

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Neepta Y. Choksi, Ph.D.  
  
212-527-7700

**FULL NAME AND RESIDENCE OF INVENTOR 1**

LAST NAME: Harnish

FIRST NAME: Douglas

MIDDLE NAME: C.

CITY: Warrington STATE OR FOREIGN COUNTRY: PA COUNTRY OF CITIZENSHIP: USA



POST OFFICE ADDRESS: 389 Bradford Ave. CITY: Warrington STATE OR COUNTRY: PA ZIP CODE: 18976

FULL NAME AND RESIDENCE OF INVENTOR 2

LAST NAME: Scicchitano FIRST NAME: Marshall MIDDLE NAME: S.

CITY: Douglasville STATE OR FOREIGN COUNTRY: PA COUNTRY OF CITIZENSHIP: USA

POST OFFICE ADDRESS: 104 Meadowcrest La. CITY: Douglasville STATE OR COUNTRY: PA ZIP CODE: 19518

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LAST NAME: Karathanasis FIRST NAME: Sotirios MIDDLE NAME: K.

CITY: Saline STATE OR FOREIGN COUNTRY: MI COUNTRY OF CITIZENSHIP: Greece

POST OFFICE ADDRESS: 4498 Saline-Waterworks Rd. CITY: Saline STATE OR COUNTRY: MI ZIP CODE: 48176

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LAST NAME: Hsiao FIRST NAME: Chu-Lai MIDDLE NAME:

CITY: Waltham STATE OR FOREIGN COUNTRY: MA COUNTRY OF CITIZENSHIP: USA

POST OFFICE ADDRESS: 55 Sherbourne Place CITY: Waltham STATE OR COUNTRY: MA ZIP CODE: 02451-7303

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DATED: \_\_\_\_\_

SIGNATURE OF INVENTOR 2: \_\_\_\_\_

DATED: \_\_\_\_\_

SIGNATURE OF INVENTOR 3: \_\_\_\_\_

DATED: 2/12/02

SIGNATURE OF INVENTOR 4: \_\_\_\_\_

DATED: \_\_\_\_\_

M:\0630\1G704\KRJ6181.WPD

*Subscribed and sworn to before me  
this 12, day of Feb, 2002  
Krista Mattson*

KRISTA MATTSON  
NOTARY PUBLIC WASHTENAW CO., MI  
MY COMMISSION EXPIRES Oct 17, 2006

**DECLARATION  
AND POWER OF ATTORNEY  
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SIGNATURE OF INVENTOR 3: \_\_\_\_\_ DATED: \_\_\_\_\_

SIGNATURE OF INVENTOR 4: Chulai Hsiao DATED: 2/9/02